PATENT APPLICATION FEE DETERMINATION REC												Application or Docket Number					
							10/5651				8						
		CLAIMS AS FILED - PART I										NTITY					THAN
		(Cotumn 1) (Cotumn 2								TYPE		<u> </u>		OR	SMA	LL	NTITY
	U.S. NATIO	NAL STAGE FE	ES							RATE		FEE			RATE	E	FEE
	BASIC FEE EXAMINATION FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)- (4) = \$50/\$ 100			ARGE ENT. = \$ 30	00		BASIC FEE				OR	BASIC FEE		300
l							All other situations \$ 100 / \$ 200			EXAM. FE	E	-			EXAM. FEE		200
ļ	SEARCH, FEE			U.S. is ISA = \$50/\$ 100 :. ALL other countries = \$ 200/\$400			All other situations = \$ 250 / \$ 500	=		SEARCH FEE .					SEARCH FEE		400
F	EE FOR EXT	RA SPEC. PGS.	minus 100 =			/ 50 =	/ 50 =			=		7		X \$ 250	=	•	
T	OTAL CHARGEABLE CLAIMS			/ // minus 20 = .						X \$ 25 =			OR		X \$ 50 :	X \$ 50 =	
۱N	IDEPENDENT	CLAIMS		/ minus 3 = . SENT						X \$ 100	=		70	R	X \$ 200	=	
M	ULTIPLE DEF	PENDENT CLAIM	PRES							+ \$ 180	=		70	OR	+ \$ 360 =	1	
•	If the differe	nce in column 1	is les	ess than zero, enter "0" in column 2				-		TOTAL	L] 0	R	TOTAL		900
		CLAIMS A		MENDE	(Column	2)	(Column 3)	- \	_	SMALL	. ENTI	ΙΥ	OF	₹ ~~	OTHEI SMALL		
A LYBWONEWY A	1-19-0	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO			PRESENT EXTRA			RATE TIC		DDI- NAL EE			POLTE	T	ADDI- IONAL FEE
	Total	• 14	Mir	nus	1.2)	=		L	< \$ 25 =	L		OR	٠ ٢	x \$ 50 =\		
	Independent	17	Min	ius	-3		=		x	\$ 100 =			OR	L×	\$ 200 =		
	FIRST PRESENTATION OF MULT			TIPLE DEPENDENT CLAS			м 🔲		+ \$ 180 =			OR		ŀ	\$ 360 =		1
		<u>-</u>						_	TO	FEE	-		ÓR	TO	TAL ADOIT. FEE	ĺ	-
_		(Column 1)			(Column 2)	(Column 3)	_									
		CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSE PAID FOR	Y	PRESENT EXTRA		•	RATE	ADDI- TIONA FEE	ar		! 	RATE	ADDI- TIONAL FEE	
ŀ	Total	•	Minu	s	**	-	<u> </u>		X	\$ 25 =			OR	X	\$ 50 =		
	ndependent	• Mir		s	***	-	-	Γ	X \$ 100 =			\Box c	R	X \$	200 =		
	FIRST PRES	ENTATION OF M	JLTIP	PLE DEPENDENT CLAIM					+ \$ 180 =			lo			360 =		
	<u> </u>							TO		L ADDIT.]。	R		L ADDIT.		_
			-											•			
7 6	he entry in colun	nn 1 is less than the	entry in	column 2	write "O" in colum	30 3.											-
10	he "Highest Nun	nber Previously Paid nber Previously Paid	for IN	i thas spa	CE is less than ?	10 ', e	enter "20".										-
	-	er Previously Paid F)0 a¢	Abrok	ortale box in	calumn	1.					

FORM PTO-675 (Rev. 02/2005)

Pulled and Tredomat Office - U.S. DEPARTMENT OF COMMERCE